Approved for use through 11/30/2005, CM8 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Approved for use through 11/30/2005, CM8 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Approved for use through 11/30/2005, CM8 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Approved for use through 11/30/2005, CM8 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Approved for use through 11/30/2005, CM8 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Approved for use through 11/30/2005, CM8 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Approved for use through 11/30/2005, CM8 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Approved for use through 11/30/2005, CM8 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Approved for use through 11/30/2005, CM8 0651-0035

Approved for use through 11/30/2005

Approved for use through

## POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	10/684,132
Filing Date	10/10/2003
First Named Inventor	Yiping Ding
Art Unit	
Examiner Name	
Attorney Docket Number	149-0101US

forms if more than one signature is required, see below.	l hereby ap	point:			
Name Registration Number  as my/our attomey(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.  Please recognize or change the correspondence address for the above-identified application to:  The above-mentioned Customer Number.  OR  The address associated with Customer Number:  Number Bar Code Label here  Address  Address  Address  City  Country  Telephone  Applicant/Inventor.  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Robert H. Whilden, Jr.  Signature  Date  1-23-94  Telephone  7/3-5/8-1/33  Telephone  7/3-5/8-1/33  Telephone  Telephone  Telephone  7/3-5/8-1/33  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	OR	L.	29855	Number 8ar Code	
business in the United States Patent and Trademark Office connected therewith.  Please recognize or change the correspondence address for the above-identified application to:  The above-mentioned Customer Number.  OR  The address associated with Customer Number:  OR  Firm or Individual Name  Address  Address  City  Country  Telephone  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Robert H. Whilden, Jr.  Signature  Date  1 2 - 2 - 4.  Telephone  Telephone  7 - 3 - 57 - 8 - 4 - 3 - 3  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				Registration Number	
business in the United States Patent and Trademark Office connected therewith.  Please recognize or change the correspondence address for the above-identified application to:  The above-mentioned Customer Number.  OR  The address associated with Customer Number:  OR  Firm or Individual Name  Address  Address  City  Country  Telephone  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Robert H. Whilden, Jr.  Signature  Date  1 2 - 2 - 4.  Telephone  Telephone  7 - 3 - 57 - 8 - 4 - 3 - 3  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
business in the United States Patent and Trademark Office connected therewith.  Please recognize or change the correspondence address for the above-identified application to:  The above-mentioned Customer Number.  OR  The address associated with Customer Number:  OR  Firm or Individual Name  Address  Address  City  Country  Telephone  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Robert H. Whilden, Jr.  Signature  Date  1 2 - 2 - 4.  Telephone  Telephone  7 - 3 - 57 - 8 - 4 - 3 - 3  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
business in the United States Patent and Trademark Office connected therewith.  Please recognize or change the correspondence address for the above-identified application to:  The above-mentioned Customer Number.  OR  The address associated with Customer Number:  OR  Firm or Individual Name  Address  Address  City  Country  Telephone  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Robert H. Whilden, Jr.  Signature  Date  1 2 - 2 - 4.  Telephone  Telephone  7 - 3 - 57 - 8 - 4 - 3 - 3  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	<b>!</b>				
business in the United States Patent and Trademark Office connected therewith.  Please recognize or change the correspondence address for the above-identified application to:  The above-mentioned Customer Number.  OR  The address associated with Customer Number:  OR  Firm or Individual Name  Address  Address  City  Country  Telephone  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Robert H. Whilden, Jr.  Signature  Date  1 2 - 2 - 4.  Telephone  Telephone  7 - 3 - 57 - 8 - 4 - 3 - 3  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	<u> </u>	· · · · · · · · · · · · · · · · · · ·			
The above-mentioned Customer Number:  OR  The address associated with Customer Number:  Number Bar Code Label here  Firm or Individual Name  Address  Address  City  State  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Robert FI. Whilden, Jr.  Signature  Date  1-28-04  Telephone  7/3-5/8-4/33  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	as my/our atto business in th	omey(s) or agent(s) to prosecute to e United States Patent and Trade	the application identificant of the connected of the conn	ed above, and to transact all ed therewith.	
Address Address City State Zip  Country Telephone Fax  I am the: Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name Robert H. Whilden, Jr.  Signature Back IJ. Chapter  Date 1-28-04 Telephone 7/3-9/8-4/33  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	<ul><li>☑ The above</li><li>○R</li><li>☐ The addre</li></ul>	e-mentioned Customer Number.	<del> </del>	Plade Customer Number Bar Code	
Address  City  Country  Telephone  Fax   I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Robert H. Whilden, Jr.  Signature  Date  1-28-04  Telephone  7/3-5/8-4/33  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required, Submit multiple forms if more than one signature is required, see below.		ne			
City  Country  Telephone  Fax  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Robert H. Whilden, Jr.  Signature  Date  1-28-04  Telephone  7/3-9/8-4/33  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required, Submit multiple forms if more than one signature is required, see below.	Address				
Telephone   Fax    I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name   Robert FL Whilden, Jr.  Signature   Subject 12. Charles    Date   1-28-04   Telephone   7/3-9/8-4/33    NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			· · · · · · · · · · · · · · · · · · ·	·	
Telephone   Fex    I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name   Robert H. Whilden, Jr.  Signature   SSect IJ.   Telephone   7 / 3 - 7 / 8 - ½ / 3 3    NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required, Submit multiple forms if more than one signature is required, see below*.		-	State	Zip	
I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name Robert H. Whilden, Jr.  Signature  Date  1-28-94  Telephone  7/3-7/8-4/33  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required, Submit multiple forms if more than one signature is required, see below.					
Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name Robert H. Whilden, Jr.  Signature Signature Telephone 7/3-9/8-4/33  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required, Submit multiple forms if more than one signature is required, see below.			FEX		
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name Robert H. Whilden, Jr.  Signature Date  1-28-e-4  Telephone 7/3-7/8-4/33  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	The state of the s				
Name Robert H. Whilden, Jr.  Signature Sect 12. Telephone 7/3-5/8-4/33  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required, Submit multiple forms if more than one signature is required, see below.	Assignee of record of the entire interest. See 37 CFR 3.71.				
Name Robert H. Whilden, Jr.  Signature  Date  1-28-04  Telephone  7/3-7/8-4/33  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
Signature    Sect   J. Charles.	Name	<u>.</u>	· · · · · · · · · · · · · · · · · · ·		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
forms if more than one signature is required, see below.	Date	1-28-04	Telephone	713-918-4133	
Total of forms are submitted.	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple				
	Total of	forms are submitted.			

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and automitting the completed application form to the USPTO. Time will very depending on the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2



PTO/SB/36 (08-03)

Approved for use through 07/31/2006. CMB 0851-0331

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unloss it displays a valid CMB control number.

STATEM	ENT UNDER 37 CFR 3.73(b)
Applicant/Patent Owner: Yiping Ding	
Application No./Patent No.: 10/684,132	Filed/Issue Date: 10/10/2003
Entitled: System and method for statistical perform	mance monitoring
BMC Software, Inc.	, a <u>Delaware corporation</u>
(Name of Assignee)	(Type of Assignee, e.g., corporation, partnership, university, government agency, ecc.)
states that it is:	
1.  the assignee of the entire right, title, and inte	erest, or
an assignee of less than the entire right, title     The extent (by, percentage) of its ownership in the patent application/patent identified above by vir	interest is %
	tion/patent identified above. The assignment was recorded in the United Patent, or for which a copy thereof is attached.
OR .	· · ·
B. [ ] A chain of title from the inventor(s), of the patent applicat	ion/patent identified above, to the current assignee as shown below:
The document was recorded in the United States Reel, Frame, or to  From: The document was recorded in the United States Reel, Frame, or for  Frame, Frame, or for	Patent and Trademark Office at rwhich a copy thereof is attached.  To:
The document was recorded in the United States	Patent and Trademark Office at
Reel, Frame, or for [ ] Additional documents in the chain of title are listed	
	tle are attached. nent or a true copy of the original document) must be submitted to e assignment is to be recorded in the records of the USPTO. <u>Sea</u> MPEP
The undersigned (whose title is supplied below) is authorized to	act on behalf of the assignee.
<u> </u>	Robert H. Whilden, Jr.
	Typed or printed name
<u>フィ3-ティ8・4/35</u> Telephone number	Signature
	Sr. VicePresident, Gen. Counsel, Secretary
•	Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, and submitting the completed application form to the USPTO. Time will vary depending upon the includings case, Any comments on the amount of time you require to complete this form and/or suggistions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETE D FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.